FORM D

# UNITED STATES /

SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL
OMB Number: 3235-0076
Expires: April 30, 2008

Estimated average burden hours per response....... 1

SEC USE ONLY					
D 6"		0			
Prefix		Serial			
	1				
DATE RECEIVED					
ואט		<b>V</b> L D			
4	<b>2</b> \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				

Name of Offering (☐ check if this is an amendment and name has changed, and indicate change.) Series A Preferred Stock Financing	DECEMBED TO
	$\stackrel{\square}{\leftarrow}$ 0CT 3 1 2006 $\stackrel{\searrow}{>}$
Type of Filing: ☐ New Filing ☐ Amendment	
A. BASIC IDENTIFICATION DATA	VA 135 /8
1. Enter the information requested about the issuer	
Name of Issuer (  check if this is an amendment and name has changed, and indicate change.) TXE Systems, Inc.	<u> </u>
Address of Executive Offices (Number and Street, City, State, Zip Code) 1475 Veterans Boulevard, Redwood City, California 94063 Telephor (650) 24	ne Number (Including Area Code) 15-2204
Address of Principal Business Operations (Number and Street, City, State, Zip Code)  Telephor (if different from Executive Offices)	ne Number (Including Area Code)
Brief Description of Business	ROCESSED
Type of Business  Organization □ limited partnership, already formed □ other (please specify):  □ corporation □ limited partnership, to be formed □ business trust	NOV 1.5 2006 THÚM:-
Actual or Estimated Date of Incorporation or Organization:    Month Year     1   1   0   2	FINANCI/11  Estimated

### GENERAL INSTRUCTIONS

### **Federal**

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

### **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (6-02) 1 of 8

#### A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
  - Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
  - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

and					•
<ul> <li>Each general and</li> </ul>	managing partn	er of partnership issuers.			
Check Box(es) that Apply	☐ Promoter	☑ Beneficial Owner	☑ Executive Officer	⊠ Director	☐ General and/or Managing Partner
Full Name (Last name first Stevens, Larry	, if individual)		,		
Business or Residence Add c/o TXE Systems, Inc., 147				·	
Check Box(es) that Apply	□ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or  Managing Partner
Full Name (Last name first Camp, Justin	, if individual)			,	<u> </u>
Business or Residence Add c/o TXE Systems, Inc., 147					
Check Box(es) that Apply	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or  Managing Partner
Full Name (Last name first Negus, Kevin	, if individual)				
Business or Residence Add c/o TXE Systems, Inc., 147					
Check Box(es) that Apply	☐ Promoter	☑ Beneficial Owner	⊠ Executive Officer	☑ Director	☐ General and/or  Managing Partner
Full Name (Last name first Turgut, Kagun	, if individual)	: '.			-
Business or Residence Add c/o TXE Systems, Inc., 147					
Check Box(es) that Apply	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first Camp Ventures II, L.P.	, if individual)		,	,	
Business or Residence Add c/o TXE Systems, Inc., 147	•		•		
Check Box(es) that Apply	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first	, if individual)				
Business or Residence Add	lress (Number a	and Street, City, State, Zi	ip Code)		
Check Box(es) that Apply	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or  Managing Partner
Full Name (Last name first	, if individual)	•	•		
Business or Residence Add	lress (Number a	and Street, City, State, Zi	ip Code)		
	(Hse blank che	et or conv and use addi	tional conies of this she	eet as necessar	w) .

			•		B. IN	FORMA	TION A	BOUT O	FFERIN	īG				
		;											Yes	No
1. F	Ias the is:	suer solo	l, or does	the issue	r intend t	o sell, to	non-accre	dited inv	estors in t	his offeri	ng?	•••••		$\boxtimes$
Answer also in Appendix, Column 2, if filing under ULOE.														
2.	What is th	ne minin	num inve	stment th	at will be	accepted	l from any	/ individu	ıal?				\$	N/A
													<u>Yes</u>	<u>No</u>
3. I	oes the o	offering	permit jo	int owner	ship of a	single un	it?	•••••	••••••		•••••	•••••	$\boxtimes$	
) ]	commissi f a person or states,	on or sir n to be l list the r	nilar remisted is an ame of t	uneration n associat he broker	for solic ed persor or dealer	itation of or agent If more	purchase of a brok	ers in com ter or dea e (5) pers	nection w ler registe ons to be	ith sales cred with listed are	of securit the SEC:	or indirectly, any ies in the offering and/or with a state ed persons of such		
Full Na	me (Last	name fi	rst, if ind	ividual)										
		÷			nd Street,	.City, Sta	ite, Zip C	ode)			. <del></del>			
Name o	of Associa	ited Bro	ker or De	aler										
States is	n Which	Person I	isted Ha	s Solicite	d or Inter	nds to Sol	icit Purch	asers	···,					
(Che	ck "All S	tates", or	check ir	ndividual	States)					•••••		[	⊐ A11 S	States
[AL] [IL] [MT] [RI]	[IL]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
Full Na	me (Last	name fi	rst, if ind	ividual)	· · · · · · · · · · · · · · · · · · ·				<u>.                                      </u>					
Duging	or Pagi	danaa A	ddross ()	Jumbara	nd Street	City Sta	ıte, Zip C	oda)						
Dusines	S OI ICCSI	delice A	uuress (1	vuilloci a	na succi,	City, 5ta	ite, zip C	ouc)						
Name o	f Associa	ted Bro	ker or De	ealer .	· · · · · · · · · · · · · · · · · · ·	· · · · · ·	· · · · · · · · · · · · · · · · · · ·							<del></del>
States in	n Which	Person I	isted Ha	s Solicite	d or Inter	ds to Sol	icit Purch	asers				· · · · · · · · · · · · · · · · · · ·		
(Che	ck "All S	tates" or	check ir	idividual	States)							[		States
[AL]		[AZ]	[AR]	[CA] [KY]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA] [MN]	[HI]	[ID] [MO]		
[IL] [MT]	[IL]   [NE]	[IA] [NV]	[KS] [NH]	[NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[OK]	[MS] [OR]	[PA]		
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Full Na	me (Last	name fi	rst, if ind	ividual)				•						
Busines	s or Resi	dence A	ddress (1	Number a	nd Street,	City, Sta	ite, Zip C	ode)						<del></del>
Name o	of Associa	ited Bro	ker or De	aler										
States in	n Which	Person I	isted Ha	s Solicite	d or Inter	ıds to Sol	icit Purch	asers						
		,								.,			⊐ All 5	States
[AL] [IL] [MT] [RI]	[IL]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.) 3 of 8

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND US	SE OF PROCEE	DS
1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offerin check this box □ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	g,	
Type of Security	Aggregate Offering Prio	
Debt	\$	<b>\$</b>
Equity		254,527.09
□ Common ⊠ Preferred		
Convertible Securities (including warrants)	\$	\$
Partnership Interests		\$
Other (Specify))	\$	\$
Total		<b>254,527.09</b>
Answer also in Appendix, Column 3, if filing under ULOE.		
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504 indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
	Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors	6	<u>\$ 254,527.09</u>
Non-accredited Investors		\$0
Total (for filings under Rule 504 only)		\$N/A
Answer also in Appendix, Column 4, if filing under ULOE.		
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for a securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (1 months prior to the first sale of securities in this offering. Classify securities by type listed Part C – Question 1.	2)	
Type of offering	Type of Security	Dollar Amount Sold
Rule 505	-	\$ 0
Regulation A	•	\$0
Rule 504		\$0
Total	•	\$ 0
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of a expenditure is not known, furnish an estimate and check the box to the left of the estimate.	ne ne	
Transfer Agent's Fees		\$
Printing and Engraving Costs		\$
Legal Fees	🗵	\$5,000.00
Accounting Fees		\$
Engineering Fees		\$
Sales Commissions (specify finders' fees separately)		\$
Other Expenses (identify)		\$

5,000.00

\$\_\_

	)					
	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENS	SES A	ND USE OF PROC	CEED	S	
b. Q is	٠	\$	249,527.09			
us es ec	dicate below the amount of the adjusted gross proceeds to the issuer used or pred for each of the purposes shown. If the amount for any purpose is not know timate and check the box to the left of the estimate. The total of the payment qual the adjusted gross proceeds to the issuer set forth in response to Part C - sove.	n, furr s liste	nish an 1 must			
			Payments to Officers, Directors & Affiliates			ments to Others
	Salaries and fees		\$		\$	
	Purchase of real estate		\$		\$	·· <del>·</del>
	Purchase, rental or leasing and installation of machinery and equipment		\$		\$	
	Construction or leasing of plant buildings and facilities		\$		\$	
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		\$		\$	
	Repayment of indebtedness		\$		\$	
	Working capital	$\boxtimes$	\$ <u>249,527.09</u>	$\boxtimes$	\$	249,527.09
	Other (specify):		\$		\$	
			•			
			\$		\$	······
	Column Totals	☒	\$ 249,527.09	Ø	<b>\$</b>	<u>249,527.09</u>
	Total Payments Listed (column totals added)		⊠ \$ <u>_</u> 2	249,52	7.09	
	D. FEDERAL SIGNATURE					
follo	ssuer has duly caused this notice to be signed by the undersigned duly authorize wing signature constitutes an undertaking by the issuer to furnish to the U.S. Set of its staff, the information furnished by the issuer to any non-accredited inve	ecuriti	ies and Exchange C	ommi	ssion,	upon written
	r (Print or Type) Systems, Inc. Signature			Date Octob	1]	2006
	re of Signer (Print or Type) Title of Signer (Print or Type) Chief Executive Officer & Pre		t			

## **ATTENTION**

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)